

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	<i>AS</i>	IC 886	01.26.01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	07/21/02
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3	2/25/02
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Claim	Date
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Original	
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52	11/11/02
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Claim	Date
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**BEST AVAILABLE COPY** If more than 150 claims or 10 actions  
 staple additional sheet here

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